



## Chapter 2

### Troubleshooting Guidelines for Ameda Pumps





# Ameda Breast Pump Troubleshooting Guidelines

The following troubleshooting guidelines should be used when a WIC participant claims that her breast pump is not working. Ask the mom why she feels her pump is not working correctly and skip to the appropriate trouble shooting statement.

## *If the pump won't turn on ...*

### **Elite**

- Is the pump plugged in?
- Is the vacuum turned on? The vacuum is the on-off mechanism.
- If yes, ask the mother to come in and get a replacement pump. Follow the procedures below to contact Ameda about the pump.

### **Purely Yours**


- Is the AC adapter plugged into the wall?
- Is the AC adapter plugged into correct side of the pump?
- If she is using batteries instead of the AC adapter, the pump may need new batteries.
- If you cannot solve the problem ask the mother to come in and follow the procedures on page 29 to issue her a replacement motor unit and contact Ameda about the pump.

## *If the mom complains that it hurts to use the pump ...*

- Ask if she is using the reducing insert. Most women do not need it.
- Ask how high she normally has the vacuum. Putting the vacuum on high will not help produce more milk and could cause her discomfort. Tell her to turn the vacuum up only as high as is comfortable for her.
- If she complains that the flange feels too tight, or if her nipple is rubbing against the nipple tunnel, or if she has red streaks or blisters around the nipple area in a circular pattern, recommend a larger breast flange.

## *If an Elite or Purely Yours pump is making strange noises ...*

- Have the mom check that the white valves and diaphragms are in place.
- If so, ask the mother to come in so you can take a look at the pump. If you cannot solve the problem, issue her a replacement motor unit and contact Ameda about the pump.



*If the mom is concerned that her breast pump does not have enough vacuum or that her milk supply is decreasing ...*

- Please read Concerns about Milk Supply, pages 33-34. Be sure to ask the mother how often she is currently nursing her baby.
- Use the following troubleshooting questions to try to solve the problem over the phone. If you cannot solve the problem over the phone, ask the mom to come in; use the vacuum gauge provided by the state agency to check that the vacuum is working properly. “The Guidelines for Using the Vacuum Gauge” immediately follow this section.

#### **Purely Yours and Elite**

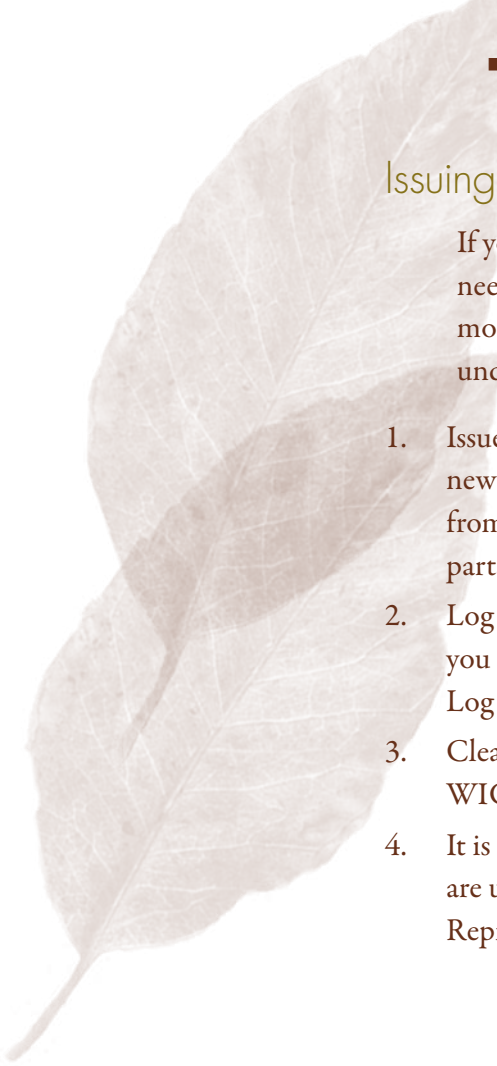
- Are the white valve and diaphragm in place? The pump will not work unless both the valve and diaphragm are in place.
- Is the white valve torn? If so, ask her to replace the white valve with a new one. If she has run out of her replacement valves, have her come in to get two more.
- Does the participant have the vacuum turned up?
- Is she using the reducing insert in the breast flange? Only women with small nipples need this.

#### **One-hand manual breast pump**

- Have the mom check for valve placement and integrity of the valve.
- Make sure the piston seal is in place. Sometimes when the piston seal is removed from the piston it is not put back on all the way. A simple way to have her check this is to have her run her finger around the bottom of the piston. It should be flat.
- Is the handle clipped too low? The top of the handle should be flat.
- Hold the manual pump high on its body for better control.
- Is she using the reducing insert in the breast flange? Most women don’t need this.

*If you are unable to resolve the problem over the phone:*

- Have the participant bring the entire pump and kit to the clinic.
- See if you can fix the problem or follow the vacuum gauge instructions on pages 32-33 and see if the vacuum is functioning correctly. If you cannot fix the problem, contact Ameda Quality Control at 1 (800) 323-4060 (press option 3). Even if you know that the pump is out of warranty, you should still contact Ameda Quality Control.
- Tell Ameda you are from a Texas WIC clinic and have a pump that is not working properly. The representative will ask you what the pump is or is not doing.

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- If it is a Purely Yours pump, the Ameda representative will ask you what date it was issued to the participant.
  - If it is an Elite pump, the Ameda representative will ask you for its serial number and what date it was received by your local agency.

## Issuing Replacement Parts

If you are unable to fix the problem and the mother is enrolled in WIC and still needs a breast pump, you will need to issue her a replacement part (such as a new motor unit) to fix the pump. This is regardless of whether or not the pump is under warranty.

1. Issue the participant a replacement for only the broken part of the pump, with a new part from a new pump, a new kit, or free replacement parts that you ordered from the state agency. (See page 16 for information on ordering free replacement parts.)
2. Log out the replacement part on the appropriate inventory form. For example, if you issue a new Purely Yours motor unit, log the issuance on the WIC Inventory Log for Single-User Electric Breast Pumps.
3. Clearly mark the opened new pump as incomplete so it is not issued to another WIC participant.
4. It is not necessary to give the mom an entire new pump and or kit unless you are uncertain what the problem is. If you are uncertain, let the Quality Control Representative know when you call.



### WIC Repair Call-in Procedure for In-Warranty Ameda Product

Step #1	WIC Agency will identify serial numbers on pumps/kits in need of repair.
Step #2	WIC Agency will call Ameda at 1-800-323-4060.
Step #3	After the general announcement, the WIC Agency will press 8 on the telephone keypad. There is no prompt for this option as it is specifically used for WIC Refurbish/Repair customer group only.
Step #4	WIC Agency will enter the Special Code "942" (WIC).
Step #5	WIC Agency will follow the menu and will press 1 for Ameda pumps in warranty. Advise Customer Service Representative of your intent to return a pump for repair. (If you enter the wrong extension you will be transferred to the correct area.)
Step #6	If WIC Agency reaches voice mail, the caller will leave a telephone number with area code and the reason for the call. The call will be returned within 24 hours.
Step #7	Ameda will determine if pump is still under warranty. If the pump is under warranty, a call tag will be sent from Ameda. Affix the call tag to the pump box to return the pump to Ameda.
Step 8	Ameda will repair and return the pump to the agency.

### WIC Repair Call-in Procedure for Infested Multi-user Pumps

Ameda will provide a limited number of complimentary insect de-infestation treatments or repairs per year. If you have a multi-user pump that has become infested with insects, please use the procedures below.

Step #1	Isolate the pump from other inventory. Double Bag pump in plastic zip lock bag clearly labeled ("INFESTED"). Store the bagged pump for two weeks, preferably in a freezer before returning..
Step #2	Follow steps 1-8 for in-warranty pumps.



## WIC Repair Call-in Procedure for Out-of-Warranty Ameda Product

It is not necessary for local agencies to repair out-of-warranty pumps however, if a local agency chooses to repair an out-of-warranty pump, the local agency will need to pay for the repair with local agency funds.

Step #1	Follow steps 1-4 for in-warranty pumps.
Step #2	WIC Agency will follow the menu and will press 2 for out-of-warranty Ameda pumps (Refurb program). Advise Customer Service Representative of your intent to return a pump for repair. (If you enter the wrong extension you will be transferred to the correct area.)
Step #3	If WIC Agency reaches voice mail, the caller will leave a telephone number with area code and the reason for the call. The call will be returned within 24 hours.
Step #4	Ameda will determine whether pumps are in or out of warranty. If the pumps are out of warranty, an appropriate Return Authorization (RA) Number will be given to the WIC Agency. Note: You will not get a call tag. Only an RA number will be given to you at the time of call-in if the pump is out of warranty (for the refurbish program)..
Step #5	WIC Agency will return the Ameda pump at their own expense using the RA number.
Step #6	Ameda will repair and return the pump to the agency for the WIC repair price of \$135.00 For extensive internal cleaning, pumps requiring this service will be subject to a cleaning fee of \$70.
Step #7	All pumps being refurbished at the \$135 rate will receive a 1 Year Warranty.

### Lengths of warranty:


- Purely Yours — received by the local agency prior to January 2004 — 1 year from date of issuance
- Purely Yours — received by the local agency between January 2004 and September 2007 — 2 years from date of issuance
- Purely Yours — received by the local agency after November 2007 — 1 year from date of issuance
- Elite — received prior to January 2004 — 2 years from the date received at your local agency
- Elite — received between January 2004 and September 2007 — 4 years from the date received at your local agency
- Elite — received by the local agency after November 2007 — 3 years from the date received at your local agency
- HygieniKits — 1 year from the date of issuance
- Manual pumps — 90 days from the date of issuance

# Ameda Vacuum Gauge Guidelines

The vacuum gauge measures the amount of suction produced by the breast pump.  
To use the gauge:

1. Check whether the gauge is calibrated (with the arrow pointing to zero). If it is already calibrated, skip to step 2.
2. Place the gauge in the breast flange.
  - If the gauge is not calibrated, use a flat screwdriver to lift the plastic cover off the gauge.
  - Adjust the screw at the bottom of the gauge toward – or + to bring the needle back to zero.
  - Replace the plastic cover on the gauge.
3. If you are checking the pump as a one-sided pump make sure you have removed one tube and closed the white pump connector. If you are checking the pump as a two-sided pump make sure both tubes are attached to the white pump connector.
4. If you are using the pump as a double pump, place the additional rubber stopper provided in the other breast flange.
5. Turn on the pump to maximum speed and maximum vacuum settings.
6. Allow the pump to operate for a few minutes to establish a rhythm before taking readings.
7. To read the gauge in mm of Hg be sure to look at the numbers on the inside dial.
8. Appropriate vacuum ranges at maximum speed and vacuum:
  - Elite
    - –223 to –262 mm Hg as a single-sided pump
    - –197 to –232 mm Hg as a double-sided pump
  - Purely Yours
    - –243 mm Hg or greater as a single-sided pump
    - –175 to –214 mm Hg as a double-sided pump
9. Appropriate vacuum at minimum speed and vacuum settings:
  - Elite
    - –75 mm Hg or less as a double pump
  - Purely Yours
    - –75 mm Hg or less as a double pump
10. If the levels do not fall within the appropriate ranges:




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- Try checking each side separately to see if both sides are low, or only one side. If only one side is low then the problem is with the kit. Try replacing the white valve.
  - Check that all of the HygieniKit's parts are intact.
  - Ensure that there is an appropriate seal between the flange and the rubber stopper.
  - If the pump still does not give the appropriate readings, call Ameda at 1-(800) 323-4060 (press option 3).

## Concerns About Milk Supply

If a mother is concerned about her milk supply and feels her pump is not working appropriately, follow the *Breast Pump Troubleshooting Guidelines* to check that the pump is working properly. If the pump is in good working condition, the following points may be used to guide a discussion about her concerns.

- Consider the length of time the mother has been using the pump.
- The first time an electric pump is used, a mother may only get a minimal amount of milk. The more a pump is used, the more her brain becomes familiar with the pump and directs the pituitary gland to make and release milk. Therefore, the more a pump is used, the more milk can be expressed as the brain becomes familiar with the signal. Some women have so much trouble eliciting a let-down that they find more milk can be expressed if they pump one breast while the baby is nursing at the other. This can also be done with a one-handed manual pump.
- Ask the mom what she thinks about when she tries to pump, or if she is under a great deal of pressure at her work.
- If she is stressed at work or overly focused on finishing the pumping session as quick as possible she may find it hard to elicit a let down. Tell her to try and think about her baby. She could try looking at a picture of her baby or even listening to a tape of the baby crying.
- Ask the mom if she has been pumping on a regular schedule at work.
- It's very easy to get busy at work and skip or delay a scheduled pumping. Remind the mom of the importance of pumping regularly or whenever her breasts feel full or heavy. Unrelieved pressure or fullness in the breasts will cause the mother's body to down-regulate her milk supply.
- Ask how often she has been feeding the baby at the breast when they are together.



A baby is much more effective than the breast pump at eliciting and maintaining a large milk supply. If she has recently stopped feeding her baby at the breast or if she has decreased the number of times she nurses, it may cause her supply to decrease. If this is the case, see if she can use 1–2 days' vacation time to stay home and nurse her baby to boost her milk supply.

- Ask if there is a particular time of day that she finds she produces less milk.

Many women find they pump less milk at the end of the workday and at the end of the workweek. This is normal; it doesn't mean they don't have enough milk. Remind the mother that, the softer or less full the breast, the higher the fat content of the milk. Although the baby may be taking in less volume at the end of the day, the fat content of the milk is higher, ounce for ounce, resulting in a satisfying feeding with less volume. Remind the mother that the best time to collect extra milk is in the mornings.

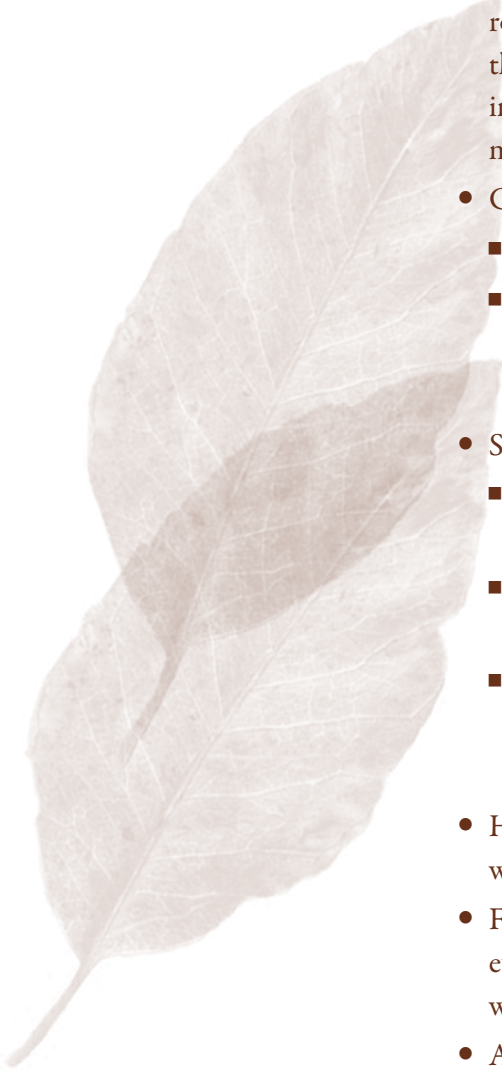
- Be sure also to ask about her baby — how he seems to be doing — and about the number of dirty and wet diapers each day. If there is a cause for concern (for example, he is no longer producing any dirty diapers), provide her with a copy of *How Do I Know if I am Making Enough Milk*, stock no. 13-06-12038 and 13-06-12038a.

## Tips for Establishing a Milk Supply by Pumping

### For Mothers of Premature or Sick Newborns

A mother's goal is to pump 25 ounces (750 ml) a day (per baby) by the time her infant is 14 days old. Here are some helpful tips for establishing a milk supply with a breast pump:

- Have her express often — she shouldn't wait for her breasts to feel full. Waiting too long between pumpings can cause the milk to dry up.
- Have her express more often and longer — pumping eight to 10 times a day for 10 to 15 minutes each time. Mothers of multiples should plan to pump 10–12 times per day or at least 100 minutes per baby.
- Make sure she is double pumping. Many mothers report this saves time and studies indicate double pumping increases prolactin, the milk-making hormone.

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- Teach her about massaging the breasts, and stimulating the nipples (nipple rolling) prior to pumping. Massage increases the overall fat content of the milk and, in some cases, increases the amount pumped. Nipple rolling increases the release of oxytocin (the hormone that tells your body to eject the milk from your breast).
  - Clarify how to use the pump:
    - Start the pump on low suction and work up to the point of flow.
    - Pump until the flow of milk slows has stopped for 1-2 minutes. Then massage both breasts for 1-2 minutes, concentrating on the areas that still feel “full.” Then pump both breasts again for 1-2 minutes.
  - Share the advantages of:
    - Playing relaxing music. Some women have reported increased volumes of milk when listening to soft tunes.
    - Looking at a picture of the baby. A picture of the baby on or near the pump helps to remind a mother why she is pumping.
    - Pumping while visiting, or right after visiting, the baby in the NICU. Research shows that when mothers pump right after visiting their baby their milk supply increases, especially if they can touch or hold their infant.
  - Have her keep a pumping log with the time and amount of milk pumped. This will help her ensure she is pumping often enough.
  - Focus on the relationship instead of the ounces. If the mother is doing everything she can to increase her milk supply and it doesn’t seem to be working, she may relax more when her baby’s condition isn’t so critical.
  - Always refer when in doubt the counseling resource: *Mother’s Milk for Premature Babies*, DSHS stock no. 13-46.

